MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. *10666896* FILING DATE *09-17-03*

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	1						51							
2							52							
3							53							
4							54							
5							55							
6	1						56							
7		1					57							
8							58							
9							59							
10							60							
11	1						61							
12	1						62							
13		2					63							
14							64							
15							65							
16							66							
17							67							
18							68							
19							69							
20							70							
21							71							
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36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	4						TOTAL IND.							
TOTAL DEP.	10						TOTAL DEP.							
TOTAL CLAIMS	14						TOTAL CLAIMS							